TOWN OF FREDERICA

PO BOX 294 FREDERICA DE.19946 302-335-5417

Application Fee \$100.00

APPLICATION FOR SUBDIVISION PLOT APPROVAL

THE UNDERSIGNED APPLICANT DESIRES, BY THE FILING OF THIS NOTICE OF INTENT TO INFORM THE TOWN COUNCIL AND PLANNING COMMISSION OF HIS INTENTION TO MAKE APPLICATION FOR APPROVAL OF A SUBDIVISION PLOT IN ACCORDANCE WITH THE SUBDIVISION REGULATIONS OF THE TOWN OF FREDERICA.

| 1. NAME OF APPLICANT : | | |
|---|--------|--|
| 2. ADDRESS OF APPLICANT : | | |
| 3. TELEPHONE NO FAX NO | | |
| 4. LOCATION OF PROPERTY TO BE SUBDIVIDED | | |
| 5. APPROXIMATE AREA (ACRES) | | |
| 6. PRESENT USE | | |
| 7. PRESENT ZONING | | |
| 8. PROPOSED NAME OF NEW SUBDIVISION | | |
| 9. NUMBER OF LOTS IN ENTIRE PLOT. | | |
| 10. IS SUBDIVISION PROPOSED IN PHASES ? | | |
| IF SO, NUMBER OF LOTS IN EACH SECTION? | | |
| 11. TENTATIVE DATE OF INITIAL CONSTRUCTION | | |
| 12. NAME & ADDRESS OF LEGAL OWNER OF PROPERTY (IF APPLICANT IS OTHER THAN OWNE THIS NOTICE OF INTENT MUST BE COUNTERSIGNED BY THE LEGAL OWNER TO INDICATE THA APPLICANT IS ACTING WITH THE OWNER'S KNOWLEDGE AND CONSENT) | THE T. | |
| 13. NAME OF ENGINEER (REGISTERED PROFESSIONAL ENGINEER IN DELAWARE | | |
| 14. NAME OF LEGAL REPRESENTATIVE (MEMBER OF DELAWARE BAR) | | |
| 15. DATE WHEN PRELIMINARY SKETCH WILL BE READY FOR INFORMAL REVIEW BY APPLICATIONER WITH TOWN ADEMINESTERATORAPPLICATIONFOR SUBDIVISION | NT'S | |

16. IN ANY CASE WHERE AN OWNER OR APPLICANT IS A CORPORATION, INFORMATION MUST BE INCLUDED REGARDING THE STATE AND DATE OF INCORPORATION AND THE NAMES AND ADDRESSES OF THE CORPORATE OFFICERS:

| STATE OF INCORPORATION | DATE | |
|------------------------|---------|--|
| NAME OF PRESIDENT | ADDRESS | |
| NAME OF VICE-PRESIDENT | ADDRESS | |
| NAME OF SECRETARY | ADDRESS | |
| NAME OF TREASURER | ADDRESS | |
| OTHER | ADDRESS | |

APPLICATION FOR SUBDIVISION

RESPECTFULLY SUBMITTED:

THIS FORMAL STATEMENT OF NOTICE OF INTENT CONSTITUTES PART I OF THE PRESCRIBED APPLICATION. THE COMPLETE SUBDIVISION APPLICATION SHALL CONSIST OF PART I AND THE FOLLOWING.

PART 2. THE SUBDIVISION PLOT PLAN, TO BE DEVELOPED FROM PRELIMINARY SKETCH PLANS.

PART 3. CONSTRUCTIN INPROVEMENT PLANS (FOR THE SECTION TO BE RECORDED).

PART 4. REPORTS OF THE APPLICANT'S ENGINEER AND ESTIMATES OF COST.

- (A) SUBDIVISION PLOT PLAN REPORT
- (B) CONSTRUCTION IMPROVEMENTS REPORT
 INFORMATION REQUIRED FOR THE PREPARATION OF A LEG

INFORMATION REQUIRED FOR THE PREPARATION OF A LEGAL DESCRIPTION OF THE STREETS AND OTHER AREAS TO BE DEDICATED TO PUBLIC USE. THIS INFORMATION FOR THE PART TO BE RECORDED SHALL ACCOPANY THE CONSTRUCTION IMPROVEMENT PLANS.

NOTE: NO PLAT, PLOT OR PLAN OF LAND SHALL BE RECEIVED FOR FILING OR RECORDING BY THE RECORDER OF DEEDS IN AND FOR KENT COUNTY UNLESS AND UNTIL SUCH PLAT, PLOT OR PLAN SHALL HAVE BEEN APPROVED BY THE TOWN BODY SO AUTHORIZED TO GRANT SUCH APPROVALS AND THE FACT OF SUCH APPROVAL SHALL HAVE BEEN ENDORSED IN WRITING UPON SUCH PLAN. AT OR PTIOR TO TIME OF RECORDATION BY THE RECORDER OF DEEDS, THE SUBDIVISION PLAN SHALL BE PROVIDED TO THE TOWN OF FREDERICA.

| APPLICANT (IF INDIVIDUAL) | | |
|--|---------------------|--------------|
| IF APPLICANT IS A CORPORATION : ATTEST: | | |
| (SEAL) | | - |
| SECRETARY | NAME OF CORPORATION | |
| SIGNATURE OF PRESIDENT | | |

APPLICATION FOR SUBDIVISION

TO BE COUNTERSIGNED BY OWNER IF OTHER THAN APPLICANT:

I HEREBY CERTIFY THAT I AM THE OWNER OF THIS LAND ON WHICH THE PROPOSED SUBDIVISION IS SITUATED AND THAT THE FOREGOING APPLICANT, IN FILING A SUBDIVISION APPLICATION FOR APPROVAL BY THE TOWN OF FREDERICA IS ACTING WITH MY KNOWLEDGE AND CONSENT. I FURTHERMORE AGREE THAT I AM FINANCIALLY RESPONSIBLE FOR ALL ENGINEERING AND ATTORNEY FEES THAT MAY BE RELATIVE TO THE REVIEW OF THIS APPLICATAION AND/OR THAT MAY RESULT FROM ANY LITIGATION BROUGHT AGAINST THE TOWN OF FREDERICA RELATIVE TO THIS SUBDIVISION.

| SIGNATURE OF OWNER | DATE |
|---|--------------|
| THE UNDERSIGNED HEREBY DECLARES THAT THE IN APPLICATION IS TRUE AND CORRECT TO THE BEST O | |
| SIGNATURE OF APPLICANT (IF INDIVIDUAL) | |
| NAME & TITLE OF OFFICER (IF CORPORATION) | |
| SWORN AND SUBSCRIBED BEFORE ME THISAD 200 | DAY OF |
| N | OTARY PUBLIC |